

From: [Court Petros](#)
To: [DPH.HFSRB.PublicHearings](#)
Subject: Re: FW: [External] Opposing Mercy Closure
Date: Friday, October 30, 2020 4:05:02 PM

Received!

On Fri, Oct 30, 2020 at 3:50 PM DPH.HFSRB.PublicHearings
<DPH.HFSRB.PublicHearings@illinois.gov> wrote:

To Whom It May Concern,

This is a letter writing to strongly oppose the closure of Mercy Hospital. It is a travesty that this is even being considered in the first place.

I am an ER resident who works at Mercy Hospital. I have personally witnessed how many of Mercy's patients rely on Mercy Hospital. These people are often uninsured, lack regular healthcare, and show up very sick on our front doors. The data that Trinity provides of "decreased numbers" or "decreased admissions" is a lie. It is very easy to manipulate that data when double capacity rooms are now used as single rooms due to COVID. Our waiting room is regularly 20-30 people deep, and I usually end up admitting about half of the 12-15 patients I see in an 8-hour shift. Usually I have 1-2 ICU admissions as well. Speaking with the ICU team, the ICU is regularly at capacity.

It is easy for Trinity to say that they will turn the Mercy hospital area into an outpatient care center, but these are the patients who cannot afford much of the costs of primary care. I regularly will google GoodRx prices for my patients and print them coupons, because they don't have the internet capacity to do it at home. I will counsel patients who ask "which medication do I really need to take?" because they cannot afford both their diabetes and hypertensive medications. I have prayed and cried with families when they lose a loved one as they tell me "I knew they were sick, I wish I had brought them in sooner but I was worried we couldn't afford it."

Mercy Hospital is the only full service hospital in the South Side of Chicago. If it closes, the next closest hospital is 5.6 miles away. In Chicago traffic, that can be anywhere from 15 minutes to one hour in transit time. Much of Mercy's population do not have easy access to transportation. They are restricted to walking or public transit, which does not run at all hours of the day. It is easy to say they could call 911, but some are restricted by language barriers in calling 911, and many are deterred by the costs of an ambulance due to lack of insurance. By closing Mercy, you are condemning this patient population to more adverse outcomes from serious medical emergencies such as heart attacks and strokes. Not only does Mercy have a stroke and STEMI center, it also provides exemplary obstetrics care for a

high risk population. Black women are 2x more likely to die due to childbirth complications, something the OB team at Mercy works to fight against every day.

Besides the patient care that Mercy is necessary for, it is also an excellent teaching hospital. Many of us who are residents at Mercy chose Mercy because this is the patient population we want to serve and help. We see and recognize the disparities within healthcare, and it emboldens us to fight against these injustices and develop strategies to improve health outcomes for people of color.

To close this hospital in the midst of a pandemic is nothing short of criminal. It is saying to the Chicago community and the rest of the world that black and colored lives do not matter, that they are not worthy or deserving of the healthcare that is guaranteed to wealthier and white populations. I implore you, please keep Mercy Hospital open. The city of Chicago needs it.

Thank you,

Minti Shah

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